Transaction Date:	01/30/2012 Mon
Transaction Description:	UNITED AIRLINES ATLANTA GA
	TKT# 0164510805746 01/29
	TICKET BY MAIL
	WEBB/SM UNITED AIRLINES
	1ST BAG FEE ATLANTA GA
	FROM
	NOT RECORDED
	TO CARRIER CLASS
	NOT RECORDED
Amount \$:	25.00
Doing Business As:	UNITED AIRLINES E-TKTS
Merchant Address:	Ex. 6 - Personal Privacy
	60007 UNITED STATES
Reference Number:	001596420120130
Category:	Travel - Airline

For itineraries operated exclusively by United, United Express, Continental, Continental Express and/or Continental Connection, standard fees will apply to checked baggage with a maximum weight of 50 pounds (23 kg) per bag and a maximum outside linear dimension of 62 inches (157 cm) as follows:

- Within the U.S. (including Hawaii, Puerto Rico and the U.S. Virgin Islands) and between the U.S. and Canada: First checked bag \$25, second checked bag \$35
- Between the U.S./Canada and the Caribbean: First checked bag \$25, second checked bag \$40
- Between the U.S. and Mexico/Central America: First checked bag \$0, second checked bag \$40
- Between the U.S. and Asia/Australia/New Zealand/Micronesia/Europe/Middle East/South America (except Brazil and Venezuela): First checked bag \$0, second checked bag \$70
- Between the U.S. and Africa: First checked bag \$0, second checked bag \$70 (Fee applies only to/from Cameroon/Egypt/Malawi/Morocco/Zambia; all other African countries have a \$0 second bag fee.)
- Between the U.S. (except Hawaii) and Japan: First checked bag \$0, second checked bag \$0
- Between Hawaii, Micronesia and Japan: First checked bag \$0, second checked bag \$40

First and second checked bag fees do not apply to active-duty members of the U.S. military and their accompanying dependents, customers confirmed in United First®, United Business®, Continental First, Continental BusinessFirst® or Continental International Business, or to United Global ServicesSM, MileagePlus® 1K® or Premier Executive®, OnePass® Presidential Platinum, Platinum or Gold Elite or Star Alliance® Gold members, or Continental Airlines Presidential PlusSM primary cardmembers. First checked bag fee does not apply to MileagePlus Premier, OnePass Silver Elite or Star Alliance Silver members, MileagePlus Explorer cardmembers or OnePass Chase primary credit cardmembers.

For additional information regarding checked baggage fees, allowances, weight/size restrictions, exceptions, embargoes, or overweight, oversized, odd-sized and sporting equipment charges, go to <u>united.com/baggage</u> and select your special items and restrictions category.

For travel itineraries that include flights operated by our alliance partners or other airlines, different baggage fees may apply. <u>Learn more at united.com/baggageservices</u>

Check-in information:

▶ Please note that valid, government-issued photo identification must be presented at the airport.

Review

Name	Frequent flyer	Ticket	Fare(s)	Additional taxes and fees	Fare subtotal (s)
SAMANTHA WEBB		0162138421813	459.00USD	43.20 USD	502.20 USD
Secure	Flight data complete Rev	<u>iew</u>			

NA ui.text.confirmation.email.traveler.farerules

Travel Options Each Travel Options product will be charged separately.

Product	Credit card:	Receipt	Price
Economy Plus®	American Express xxxxxxxxxx1007	0164061104676	29.00 USD
		Travel Opt	ions total: 29.00 USD

Total price for itinerary

Billing / Delivery information

SAMANTHA WEBB

925 CANTERBURY RD NE APT 836 ATLANTA GA 30324 USA

Fare total: 502.20 USD

Grand total: 531.20 USD

Transaction Date:	01/29/2012 Sun
Transaction Description:	RIDECHARGE INC ALEXANDRIA VA REF# 0154318 703-579-6948
Amount \$:	48.59
Doing Business As:	RIDECHARGE INC
Merchant Address:	5904 RICHMOND HWY STE 340 ALEXANDRIA VA 22303 UNITED STATES
Reference Number:	021323820120130
Category:	Transportation - Taxis & Coach

2/15/12 Cab Fare From Atlanta Airport = \$23.00 cash, no receipt (Shared cab with Natalie Hooton)

Transaction Date:	02/09/2012 Thu								
Transaction Description:	UNITED AIRLINES CHICAGO IL					****			
	TKT# 0162139166027 02/09								
	• • • ·	-	222		144	*****	- 5-	<i>/</i>	
Amount \$:	194.00								
			****		A 18 M (0.4				***
Doing Business As:	UNITED AIRLINES E-TKTS								
7 T				Y 1943 cm.	*****			***	***
Merchant Address:	1200 E ALGONQUIN RD						4		
	ELK GROVE VILLAGE								
	IL								
	60007								
	UNITED STATES								
C 12 (2.14)	5 57 SERVE 000								7.550
Reference Number:	60420120209								
Communication (in the contract of the contract		** *						****	
Category:	Travel - Airline								

N009129

CUSTOMER: WEBB/SM

TKT NBR: 016 2139166027

ITEMS:

AGENT ID:

25.00

BAG1 FEE

FORM OF PAYMENT:

AXXXXXXXXXXXX1007 XXXX

ADDITIONAL REMARKS:

TOTAL USD25.00 CPN DOCUMENT NUMBER

CPN: 1

BAGGAGE PAYMENT CUSTOMER RECEIPT

ORIGIN: BGM



02-15-12

Samantha Webb Folio No. 806 : 132317 Cashier No. : 113 Room No. : 925 Canterbury Rd Ne Apt 836 Arrival A/R Number 01-29-12 Atlanta GA 30324 Group Code Departure : 02-15-12 US Conf. No. 64744755 Company Membership No.: Rate Code: **IMGOV** PC 892459784 Invoice No. Page No. : 1 of 3

Date		Description	Charges	Credits
01-29-12	*Guest Room		92.00	
01-29-12	Room Occupancy Tax		4.60	
01-29-12	Room State Tax		7.36	
01-30-12	*Guest Room		92.00	
01-30-12	Room Occupancy Tax		4.60	
01-30-12	Room State Tax	ě	7.36	
01-31-12	*Guest Room		92.00	
01-31-12	Room Occupancy Tax		4.60	
01-31-12	Room State Tax		7.36	
02-01-12	*Guest Room		92.00	
02-01-12	Room Occupancy Tax		4.60	
02-01-12	Room State Tax		7.36	
02-02-12	*Guest Room		92.00	
02-02-12	Room Occupancy Tax		4.60	
02-02-12	Room State Tax	•	7.36	
02-03-12	*Guest Room	*\ \X-	92.00	
02-03-12	Room Occupancy Tax	•	4.60	
02-03-12	Room State Tax		7.36	
02-04-12	*Guest Room	•	92.00	
02-04-12	Room Occupancy Tax	Q / 	4.60	
02-04-12	Room State Tax		7.36	
02-05-12	*Guest Room	34 T	92.00	
02-05-12	Room Occupancy Tax	Ž.	4.60	
02-05-12	Room State Tax		7.36	
02-06-12	*Guest Room		92.00	

Holiday Inn Binghamton - Arenai 2-8 Hawley Streeti (1) Binghamton, NY 139011 (1) Telephone: (607) 722-1212 Fax: (607) 722-60631



02-15-12

Samantha Webb 925 Canterbury Rd Ne Apt 836 Atlanta GA 30324 US	Folio No. A/R Number Group Code Company Membership No. Invoice No.	:	132317 PC	7 Cashier No. : 113		: : : : : : : : : : : : : : : : : : : :	01-29-12 02-15-12 64744755 IMGOV
	invoice No.	:		r. K	Page No.	•	2 01 3

Date		Description	Charges	Credits
02-06-12	Room Occupancy Tax		4.60	
02-06-12	Room State Tax		7.36	
02-07-12	*Guest Room	:	92.00	
02-07-12	Room Occupancy Tax		4.60	
02-07-12	Room State Tax		7.36	
02-08-12	*Guest Room		92.00	
02-08-12	Room Occupancy Tax		4.60	
02-08-12	Room State Tax	x	7.36	
02-09-12	*Guest Room		92.00	
02-09-12	Room Occupancy Tax		4.60	
02-09-12	Room State Tax		7.36	
02-10-12	*Guest Room		92.00	
02-10-12	Room Occupancy Tax		4.60	
02-10-12	Room State Tax		7.36	
02-11-12	*Guest Room		92.00	
02-11-12	Room Occupancy Tax		4.60	
02-11-12	Room State Tax	♦ *	7.36	
02-12-12	*Guest Room		92.00	
02-12-12	Room Occupancy Tax		4.60	
02-12-12	Room State Tax		7.36	
02-13-12	*Guest Room		92.00	
02-13-12	Room Occupancy Tax		4.60	
02-13-12	Room State Tax		7.36	
02-14-12	*Guest Room		92.00	
02-14-12	Room Occupancy Tax		4.60	

Holiday inn Binghamton - Arenai 2-8 Hawley Streeti Binghamton, NY 13901i Telephone: (607) 722-1212 Fax: (607) 722-6063i



02-15-12

Samantha Webb Folio No. : 132317 Room No. : 806 Cashier No. : 113 925 Canterbury Rd Ne Apt 836 Arrival A/R Number 01-29-12 Atlanta GA 30324 Group Code Departure: 02-15-12 US Conf. No. : 64744755 Company Membership No.: PC 892459784 Rate Code: **IMGOV** Invoice No. Page No. : 3 of 3

Date		Description		Charges	Credits
02-14-12	Room State Tax			7.36	
02-15-12	Room Occupancy Tax			-78.20	
02-15-12	Room State Tax			-125.12	
02-15-12	American Express	XXXXXXXXXX1007			1,564.00
Thank you for staying at Holiday Inn Arena. Qualifying points for this stay will automatically be credited to your account. To make additional reservations online, update your account		Total	1,564.00	1,564.00	
	i or view your statement ple you back soon.	ease visit www. priorityclub.com. We look forward to	Balance	0.00	

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

